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AF/3763

#1315  
Patent 6.21.03

Attorney's Docket No. 019952-160

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Akinori ZAITSU et al.

Application No.: 09/864,394

Filed: May 25, 2001

For: MEDICAL PUMP MONITORING  
SYSTEM

REPLY UNDER 37 C.F.R. §1.116  
- EXPEDITED PROCEDURE -  
TECHNOLOGY CENTER 3700

Group Art Unit: 3763

Examiner: M. DeSanto

Confirmation No.: 1192

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RECEIVED

OCT 16 2003

TECHNOLOGY CENTER R3700

Sir:

Enclosed is a reply for the above-identified patent application.

☒ A Petition for Extension of Time is also enclosed.

☐ A Terminal Disclaimer and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.

☐ Also enclosed is/are \_\_\_\_\_.

☐ Small entity status is hereby claimed.

☒ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$385.00 (2801) ☒ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).

☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.

☐ Applicant(s) previously submitted \_\_\_\_\_, on \_\_\_\_\_, for which continued examination is requested.

☐ Applicant(s) requests suspension of action by the Office until at least \_\_\_\_\_, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

☒ No additional claim fee is required.

☐ An additional claim fee is required, and is calculated as shown below:

| AMENDED CLAIMS   |               |   |              |                    |             |
|--|---------------|---|--------------|--------------------|-------------|
|  | NO. OF CLAIMS | HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR | EXTRA CLAIMS | RATE               | ADD'L FEE   |
| Total Claims   | 20            | MINUS 22 =                                | 0            | × \$18.00 (1202) = | 0.00        |
| Independent Claims   | 7             | MINUS 9 =                                 | 0            | × \$86.00 (1201) = | 0.00        |
| If Amendment adds multiple dependent claims, add \$290.00 (1203)             |               |   |              |                    | 0.00        |
| Total Claim Amendment Fee  |               |   |              |                    | 0.00        |
| If small entity status is claimed, subtract 50% of Total Claim Amendment Fee |               |   |              |                    | 0.00        |
| <b>TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT</b>                     |               |   |              |                    | <b>0.00</b> |

☒ A total fee in the amount of \$ 770.00 is enclosed.

☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: October 9, 2003

By: Matthew L. Schneider

Matthew L. Schneider  
Registration No. 32,814

P.O. Box 1404  
Alexandria, Virginia 22313-1404  
(703) 836-6620